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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Cain Connections PAC PO Box 25254 ADDRESS (number and street) (Check if address is changed) Alexandria 22313 CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) cainconnectionstreasurer@gmail.com (Check if address X is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) www.cainconnections.com (Check if address X is changed) DATE 02 23 2012 C00507707 FEC IDENTIFICATION NUMBER X IS THIS STATEMENT NEW (N) **OR** AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Mark Block Type or Print Name of Treasurer Mark Block [Electronically Filed] 02 24 2012 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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